

DECLARATION AND POWER OF ATTORNEY

DECLARATION:

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe, I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

READING AND SPELLING SKILL DIAGNOSIS AND TRAINING SYSTEM AND METHOD

| the specifica | tion of which (chec | ck only one item below): | • |
|---------------|----------------------|---|-----------------------|
| X | is attached hereto. | | |
| | Serial No. | ted States Application on d on | = (if applicable). |
| v | Numberand was amende | ternational application on d under PCT Article 19 | |
| | on | (if applicab | le). |

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) on which priority is claimed:

| OR FOREIGN/PCT APPLICA | TION(S) AND ANY PRIORITY | CLAIMS UNDER 35 | U.S.C. 119: |
|--------------------------------|--------------------------|-----------------|---------------------------------|
| Country (If PCT, indicate PCT) | Application Number | Date Filed | Priority Claimed (Yes/No) |
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

| PRIOR U.S. APPLICA BENEFIT UNDER 35 | TIONS OR I U.S.C. 120: | PCT INTER | NATIONAL APPLICAT | IONS DESIG | NATING T | HE U.S. FOR |
|--|---------------------------|--|-------------------|--------------------|-----------|-------------|
| U.S. APPLICATIONS | | | | STATUS (check one) | | |
| U.S. APPLICATION NUMBER U.S. FILING DATE | | | PATENTED | PENDING | ABANDONED | |
| 60/164,659 | | November 9, 1999 | | | X | |
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| PCT APPL | ICATIONS D | ESIGNAT | ING THE U.S. | | | |
| PCT APPLICATION NO. PCT FILING | | IG DATE U.S. SERIAL NUMBERS ASSIGNED (if any) | | | | |
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POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) with full power of substitution to act exclusively for Cognitive Concepts, Inc. to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Barry N. Young (Reg. No. 27,774); Timothy W. Lohse (Reg. No. 35,255); Stephen E. Reiter (Reg. No. 31,192); Steven R. Sprinkle (Reg. No. 40,825); Terrance A. Meador (Reg. No. 30,298); John Schlicher (Reg. No. 28,343); June M. Learn (Reg. No. 31,238); John Oskorep (Reg. No. 41,234); Timothy N. Ellis (Reg. No. 41,734); and William G. Goldman (Reg. No. 42,590)

All correspondence should be addressed to:

Timothy W. Lohse GRAY CARY WARE & FREIDENRICH Attn: Patent Group 400 Hamilton Avenue Palo Alto, CA 94301

All telephone calls should be directed to Timothy W. Lohse, telephone number (650) 320-7426.

| Inventor's Full Name: | Janet M. WASOWICZ | | | |
|--|---|--|--|--|
| Inventor's Signature: | Dym Norw, | | | |
| Date: | 11-7-00 | | | |
| Residence: (City, State and/or country) | Evanston, Illinois | | | |
| Citizenship: | United States | | | |
| Post Office Address: | 207 Hamilton Street, Evanston, Illinois 60202 | | | |

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Attorney Docket No.: 2100632-991141

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|---|--|-------------------|------------|-------------------|----------|---------------|-----------|----------|-----|
| Applicant: Serial No: Filed: Title: REA | ′ , | ówicz/ | / Grov | up Art Un | iit: | N/A Not.ye | et assign | ed | īD |
| | 42 | rified State | ment Clair | mine S m i | all Enti | ty Statu | 18 | | |
| Title: RE | ading and Ethod | SPELLING | SKILL DI | AGNOSI | s and | TRAIN | ing sy | 'stem Aì | ND. |
| In the nam | e of: Janet N in | I. Wasowicz | | | | | | · | |
| (X) the splice [] paten | pecification file eation serial no t no. | ad herewith filed | l Led | | | -• | | 14 | |
| | | Small | Business (| Concern | Statem | ent | | 71. | |
| I hereby d | leclare that I ar | n | | | | | | | |
| | wner of the sn | | | | | | | • | |
| [X] an of identification | fficial of the sn tified below: | nall business | concern e | mpowere | d to act | on beha | if of the | CODCETA | |
| Name of | Concern: | Cognitive | Concepts, | Inc. | | | | | |

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Codo, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time, or

990 Grove Street, Suite 300

Evanston, Illinois 60201

HV\7064264.1 2100632-991140

Address of Concern:

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temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third-party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e):

Organization Identification

| [X] no such person | , concern, of organization | • |
|--------------------|-----------------------------------|---------------------------|
| [] persons, conce | ms, or organizations listed below | |
| Full Name: | | |
| Address: | | |
| [] Individual | [] Small Business Concern | [] Nonprofit Organization |

Acknowledgment and Declaration

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.78(b))

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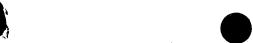
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States

Code, and that such willful false statements may jeopardize the validity of the application, any

Name of Person Signing Andrew Morrison

Title of Person Signing

Provident (EO

Name of Concern:

Cognitive Concepts, Inc.

patent issuing thereon, or any patent to which this verified statement is directed.

Address of Concern:

990 Grove Street, Suite 300, Evanston, Illinois 60201

Date:

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